ATTACH A SMALL PHOTOGRAPH EXACTLY 1½" X 2½" THAT HAS BEEN TAKEN WITHIN THE LAST 12 MONTHS OF THE DATE OF THIS APPLICATION SHOWING A FULL FACE VIEW COVERING HALF OF THE WIDTH OF THIS SPACE WITH NO HEAD COVERING, CAP OR HAT.

FOR BOARD USE ONLY

DATE RECEIVED

FILE NUMBER

TRANSACTION NUMBER

STATE OF TENNESSEE



BOARD OF EXAMINERS FOR LAND SURVEYORS

500 JAMES ROBERTSON PARKWAY, 2ND FLOOR NASHVILLE, TN 37243-1146 615-741-3611

FAX: 615-741-5995

WWW.STATE.TN.US/COMMERCE/BOARDS/SURVEYORS/INDEX

Application for Professional Land Surveyor-in-Training

THIS IS NOT AN APPLICATION FOR REGISTRATION OR LICENSING AS A PROFESSIONAL LAND SURVEYOR AND ANY DESIGNATION OR RECOGNITION BY THE BOARD WILL NOT, IN ANY WAY, OR DEGREE ENTITLE THE APPLICANT TO PRACTICE OR OFFER TO PRACTICE LAND SURVEYING. THIS APPLICATION IS PROVIDED BY BOARD POLICY TO ALLOW THOSE APPLICANTS THAT QUALIFY UNDER TCA 62-18-109(A)(i), (B)(i) OR (C)(i) TO TAKE THE NCEES EXAMINATION, FUNDAMENTALS OF LAND SURVEYING (FLS), AND BE ACKNOWLEDGED AS PROFESSIONAL-LAND SURVEYOR-IN-TRAINING (PLSIT).

IMPORTANT — PLEASE READ AND UNDERSTAND THIS FORM AND THE TENNESSEE LAWS ÆFORE YOU COMPLETE THIS APPLICATION. ALL INFORMATION REQUESTED ON THIS FORM MUST BE TYPEWRITTEN OR LEGIBLY PRINTED AND ALL QUESTIONS MUST BE ANSWERED. RETAIN A COPY FOR YOUR FILES. IF COMPLETE ADDRESSES FOR UNIVERSITIES AND ALL REFERENCES ARE NOT PROVIDED, THIS APPLICATION WILL BE RETURNED.

APPLICATION MUST BE ACCOMPANIED WITH A CHECK OR MONEY ORDER IN THE AMOUNT OF \$25.00 MADE PAYABLE TO THE TENNESSEE BOARD OF EXAMINERS FOR LAND SURVEYORS AND MAILED TO 500 JAMES ROBERTSON PARKWAY. 2ND FLOOR. NASHVILLE. TN 37243-1146.

a. Name in full			SSN		
First	Middle	Last			
b. Residence address)	
Street No.				Telephone No	
City		Cour	nty	State/Zip	
c. Business name and address			()	
	Name			Telephone No	
Street No	City	State	e/Zip	Position	
d. Date of Birth		Plac	ce of Birth		
e. Can you speak and understand t	he English languag	je?			
Do you have a disability which may require special accommodations in taking an examination?					
g. Have you ever filed an application with this Board? If yes, type of application					

h.	Has your name changed since birth?	Was your previous application made with the
	same name?	
i.	Have you ever been disciplined by any state licensing authority?	
	If so, please explain	
j.	Have you ever been denied registration or had your license suspe	ended or revoked?
	If so, name state and year	
k.	Have you ever been convicted of a felony?	If yes, please attach a separate
	statement describing the circumstances.	

2. **EDUCATION RECORD** – You must submit <u>CERTIFIED</u> transcripts with your application. You must highlight or list on separate sheet attached to the transcript all surveying related courses you are claiming for credit under the provisions of TCA 62-18-109 for eligibility categories B or C.

NAME AND COMPLETE ADDRESS OF	YEARS ATTENDED		MAJOR	DATE OF	DEGREE
COLLEGE OR UNIVERSITY	From	То		GRADUATION	RECEIVED

personal reference	knowledge of your cl must be your acaden	haracter, knowledge and nic counselor or person v	reputation. In th vith knowledge of y	nsed land surveyors, who must have the case of graduating seniors, one your academic status and education ences will expedite this process,
NAME OF	REFERENCE	COMPLETE	E ADDRESS	STATE OF REGISTRATION AND LICENSE NUMBER
NAME OF	REFERENCE	COMPLETE	ADDRESS	AND LICENSE NUMBER
	(To be attested to be	AFFIANT fore a Notary Public or other	office authorized to a	idminister oaths.)
Tennessee State additional require understand that t	Board of Examiners for ments to become a reg he designation as PLSI	or Land Surveyors and that gistered and licensed prof	at I am now commit essional land surve practice land survey	g (PLSIT) to be acknowledged by the tted to and endeavor to complete the yor in the State of Tennessee. I fully ing to any extent without being under .
		-	S	ignature of Applicant
STATE OF				
On the	day of _		, 20	, before me, a Notary Public in and
for the County and				, a resident of
		and subscribing hereto, and		e form of application attached hereto, and
		-		Signature of Affiant
Subscribed and sw	orn to before me, on the	day of		, 20
		-		Notary Public
(Seal)	My commission av	nires	20